## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

11/16/2006

SUGHRUE, MION, ZINN, MACPEAK & 2100 Pennsylvania Avenue, N.W.

Washington, DC 20037-3213



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name	
(Signature	
(Date	

APPLICATION NO.		FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/084,884	03/01/2002	Dominique Hamoir	Q68485	8179

TITLE OF INVENTION: WDM OPTICAL COMMUNICATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	<b>\$0</b>	\$1700	02/16/2007	
EXAMINER ART UNIT  LEUNG, CHRISTINA Y 2613		ART UNIT	CLASS-SUBCLASS	u271672887 DA		84884	
		398-092000					
CFR 1.363).  Change of corres Address form PTO/S  "Fee Address" inc	dication (or "Fee Address 02 or more recent) attack	ange of Correspondence	2. For printing on the patent from Ppage, Jist 4  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  ALCATEL  Paris, France							
Please check the approp	riate assignee category or	r categories (will not be pr	rinted on the patent):	Individual Corporati	ion or other private group	entity Governmen	
	are submitted:  No small entity discount  # of Copies	permitted)	Pa'A check is attached ☐ Charge any paymer ☐ PODA 19-4880. A ☐	for the NOA Fees pay at deficiency and credit duplicate copy of this	overpayment to	y, or credit any copy of this form).	
a. Applicant clain	atus (from status indicate	us. See 37 CFR 1.27.		ger claiming SMALL EN			
NOTE: The Issue Fee an interest as shown by the  Authorized Signature	records of the United Sta	uired) will not be accepte ates Patent and Trademark	d from anyone other than to Office.	Date	attorney or agent; or the	assignee or other party	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name

David J. Cushing

28,703

Registration No.